

STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 2 9 2019

PLEASE PRINT

NEW HAMPURING DEPARTMENT OF STATE

I. Name of Lobby	ist(s)	Sam Hallemeier				
II. Name of lobby	ist's pai	tnership, firm or corporation,	if any:			
	Name of	partnership, firm or corporation)				
1 Express Wa	ıy. Ma	l Stop 2W221, St. Louis,	MO 63121			
Business Address:		(Town/City		(State)	(Zip Code)	
(314) 619-08 (Telephor	395 ne)	()((Fax)	e-mail SHalle	<u>neier@express</u> -scripts.co	
		: (Choose one – file separate rections which are not attributal			ay file a separate report for	
•		ons occurring in the months prio	or to the reportin	g date relative to t	he following client:	
Express Scrip		IName of Client as it appears on the	e Lobbyist Regis	tration Form)		
OR	(in ranio or onom as it appears on m	ie mood, at regia			
		ns by the lobbyist (including the client.	e lobbyist's fam	ily), or the lobbyin	g firm listed below which are	
IV. Date of Repor	t Aı	oril 24, 2019 🕱	Ju	ly 31, 2019 🛚		
	ctivity from date of registration to 3/31/19			activity from 4/1/19 to 6/30/19		
		ctober 30, 2019 ty from 7/1/19 to 9/30/19		January 29, 2020 ☐ activity from 10/1/19 to 12/31/19		
	ed, comp	fees received and no reporta lete just this form and submit it t				
VI. Check if addit	tional re	ports are attached:				
		es or made expenditures, you mu	ust file Addend	um A- Fees and E	Expenses	
Expense Reimburs	ement	norarium or reimbursed expenses				
☐ If you, your fir	m, or yo	ur family has made political con	ntributions, you	must file Addend	um C- Political Contributions	
Sworn Statement, I have read RSA 1; and complete to the	best of	ation by Lobbyist 5-B, RSA 14-C and RSA 664 ar my knowledge and belief.	nd hereby swea	r or affirm that the $4/23/16$	foregoing information is true	
Samuel Halle (Print Name of lot						